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APPLICANTS

Chang Ahn, San Jose, CA;

Swaminathan Sundararaman, San Jose, CA;

** CONTINUING DATA *****

None
(PHH)

** FOREIGN APPLICATIONS *****

None
(PHH)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/13/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 49	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>			

ADDRESS

Stephen T. Neal
 Blakely, Sokoloff, Taylor & Zafman LLP
 Seventh Floor
 12400 Wilshire Boulevard
 Los Angeles, CA
 90025-1030

TITLE

Load balancing model for multilink frame relay

FILING FEE RECEIVED 1472	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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